

**Annual Operating Plan**  
**For Commercial Outfitters and Guides**  
(In addition to this operating plan, a detailed Trip Plan is required for each activity)

Please Check one: ☐ New application ☐ Renewal (multi-year permit)

1) Name: \_\_\_\_\_ BLM Permit # \_\_\_\_\_  
(agency use only)

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: hm.: \_\_\_\_\_ Wk.: \_\_\_\_\_ Fax: \_\_\_\_\_

2) Description of Service/Facilities

a. What services does your company offer that is unique for clients/visitors on public lands?

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b. Type of Equipment used (tents/campers, temporary corrals, etc.)

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c. Transportation: Indicate the number of each vehicle used.

\_\_\_\_\_ Trucks/SUV \_\_\_\_\_ ATVs \_\_\_\_\_ Trailers \_\_\_\_\_ Buses

Description \_\_\_\_\_

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d. Do you provide riding animals? ☐ Yes ☐ No Do you provide pack animal? ☐ Yes ☐ No

Number and type of stock: \_\_\_\_\_

Describe how animals are fed watered and controlled on public lands (corrals, highline, etc.):

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e. Sanitation

Toilets (check): \_\_\_\_\_ Pit \_\_\_\_\_ Portable \_\_\_\_\_ Chemical \_\_\_\_\_ Carryout \_\_\_\_\_ Other

f. Safety and Rescue Information

Check safety and rescue equipment carried on each trip:

☐ First Aid Kits ☐ Signaling Device ☐ Fire Extinguisher

Other \_\_\_\_\_

Describe how you would handle an emergency situation \_\_\_\_\_

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**3)** Persons that are authorized to represent your business: (list the name, address and position of all employees, guides, sub-guides, etc): Attach another sheet if needed.

Name	Address	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List must be updated within 2 weeks of hiring or firing employees.

**4)** Location – Please indicate areas of historical or anticipated use (hunt units by species):

Antelope:	Elk:
Deer:	Upland Birds:
Bighorn Sheep:	Lion:
Fishing:	Non-game Species:

Please indicate on **the NDOW map (appendix \_\_)** where you would like to be considered for an SRP.

**5)** Background Information: List other permitted areas or rivers (Please include the authorizing state or federal agency and office location.) \_\_\_\_\_

In the past two years, have you or any of your company representatives or employees been convicted of a federal, state, or local violation in connection with guide/outfitting operations or associated activities?

☐ Yes ☐ No

Have you had a BLM or USFS permit denied, suspended, or revoked? ☐ Yes ☐ No

If yes to either question, explain: \_\_\_\_\_

**I certify that the information given by me in this application is true, accurate, and complete to the best of my knowledge. I acknowledge that I (we) am (are) required to comply with requirements and stipulations on Form 8370-1 and any additional stipulations that are required by the authorized officer when the permit is issued. I further understand that the provision of false information, or the failure to keep this Operating Plan or other permit information updated, are grounds for probation, suspension, or revocation of the permit.**

\_\_\_\_\_  
Permittee/Applicant

\_\_\_\_\_  
Date